

## PART B - FEE(S) TRANSMITTAL

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08/27/2009

SQUIRE, SANDERS & DEMPSEY LLP  
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SAN FRANCISCO, CA 94111

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Mary M. Padilla

(Depositor's name)

*Mary Padilla*

(Signature)

November 24, 2009

(Date)

APPLICATION NO	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO	CONFIRMATION NO
10/631,228	07/31/2003	Jaya Pathak	050623-00251	1730

TITLE OF INVENTION: METHOD AND SYSTEM OF PURIFYING POLYMERS FOR USE WITH IMPLANTABLE MEDICAL DEVICES

APPLN TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$0	\$0	\$1510	11/27/2009
EXAMINER	ART UNIT	CLASS-SUBCLASS				
LIN, JAMES	1792	427-002100				

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.36).

- Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached
- "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47, Rev 03-02 or more recent) attached Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the name of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

*1. Squire, Sanders &*

*2. Dempsey L.L.P.*

*3. \_\_\_\_\_*

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Advanced Cardiovascular Systems, Inc.

Santa Clara, California

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fees are submitted

- Issue Fee
- Publication Fee (No small entity discount permitted)
- Advance Order - # of Copies

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

- A check is enclosed.
- Payment by credit card. Form PTO-2038 is attached.
- The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 07-1850 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- a Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- b Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2)

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Authorized Signature

Typed or printed name Cameron K. Kerrigan

Date November 24, 2009

Registration No. 44,826

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